

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

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 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Right to Life of Michigan Victory Fund</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00574178	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Western American Mailers</b>			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y		
Mailing Address 5510 33rd Street			Amount 178.65		
City Grand Rapids	State MI	Zip Code 49512	Transaction ID : SE.4591		
Purpose of Expenditure Printing/Postage, 10th CD Flier		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 21 / 2016		
Name of Federal Candidate TRUMP, DONALD J, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought		1896.92	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee <b>Western American Mailers</b>			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y		
Mailing Address 5510 33rd Street			Amount 149.08		
City Grand Rapids	State MI	Zip Code 49512	Transaction ID : SE.4592		
Purpose of Expenditure Printing/Postage, 11th CD Flier		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 21 / 2016		
Name of Federal Candidate TRUMP, DONALD J, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought		2046.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	327.73
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gruchow, Kristina, ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
10 / 21 / 2016

Signature